



State of Maine Member Enrollment/Member Change Form

Important information. Please read!

Please read the following important information before completing this form. Your ***Special Enrollment Rights for the State of Maine*** explains when you and your dependents not covered by Anthem have the right to enroll on a special basis. The ***General Notice of Pre-existing Condition Exclusion*** explains what a pre-existing condition is, how it may affect your coverage and how you can reduce the length of an exclusion period.

Special Enrollment Rights for the State of Maine

If you choose not to enroll in a health plan administered by Anthem Blue Cross and Blue Shield, there are special times when you and your eligible dependents can do so.

If you decline to enroll yourself or your dependents (including your spouse) because you have other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan at a later time. This would occur if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other health coverage). However, you must request enrollment within 60 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 60 days after the marriage, birth, adoption or placement for adoption.

Examples

Example 1 – Loss of other coverage: You and your family are enrolled through your spouse's coverage at work. Your spouse's employer stops paying for coverage. In this case, you and your spouse, as well as other dependents on your policy, may be eligible to enroll in one of our health plans.

Example 2 – You have a new dependent: You get married. You and your spouse and any other new dependents may be eligible to enroll in the plan.

You have 60 days to enroll

In each case, you may apply for enrollment with us within 60 days after:

- The other coverage ends.
- The employer stops contributing toward the other coverage.
- The marriage, birth, adoption or placement for adoption.

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General Notice of Pre-existing Condition Exclusion for the State of Maine

Your Anthem Blue Cross and Blue Shield health plan has a pre-existing condition exclusion. This means that if you had a medical condition before coming to our plan, you might have to wait a certain period of time before the plan will provide coverage for that condition.

When does the pre-existing condition exclusion apply?

The pre-existing condition exclusion applies only to medical conditions for which medical advice, diagnosis, care or treatment was received during the six months prior to the day your Anthem coverage begins.

However, if you were in a waiting period for coverage (the time your employer requires you to wait before you and your dependents can begin health insurance coverage), the six month period ends on the day before the waiting period begins.

What happens if the pre-existing condition exclusion applies?

If the pre-existing condition exclusion applies, we will not provide coverage for any claims relating to that condition for up to 12 months from your first day of coverage, or if you were in a waiting period, from the first day of the waiting period. This 12-month period (or less) of time when we will not provide coverage is known as the *pre-existing condition exclusion period*.

Are there times when a pre-existing condition exclusion does not apply?

The pre-existing condition exclusion does not apply to pregnancy, nor does it apply to children enrolled in the plan within 60 days after birth, adoption or placement for adoption.

Is there anything I can do to reduce or eliminate the pre-existing condition exclusion period?

Yes. You can reduce or eliminate the exclusion if you had prior "creditable coverage". Most prior health coverage is creditable coverage if you have not had a time without coverage that lasted more than 90 days prior to your enrollment date (more than 180 days if the prior coverage ended due to unemployment and unemployment compensation benefits were received through the period of unemployment). To reduce or eliminate the pre-existing condition exclusion period, you should give us a copy of any certificates of creditable coverage you have from your previous health insurance carrier. If you do not have a certificate, we can help you get one from your prior plan or issuer or assist you with other ways to show you had creditable coverage. Please contact us for more information.

If you have questions about the pre-existing condition exclusion and creditable coverage, please contact Customer Service at (207) 822-7272 or (800) 482-0966.

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If you have any questions, please contact the State Office of Employee Health and Benefits at 1-800-422-4503 or 287-6780. All questions need to be completed before this application can be processed.

DO NOT USE RED INK

1. Subscriber/Applicant Information
2. Enrollment Reason
3. Change Status. Please check the reason(s) for change below and indicate date.
4. Membership Choices
5. Employer Information
6. Applicant and Member Information
7. Prior Coverage Information
8. Other Information
9. Applicant Signature
10. Election Not To Enroll